In the Specification:

On Page 3, delete paragraph [0006] and insert corrected paragraph [0006], as follows:

[0006] While this MAZE III procedure has proven effective in treating medicinally refractory atrial fibrillation and associated detrimental sequelae, this operational procedure is traumatic to the patient since this is an open-heart procedure and substantial incisions are introduced into the interior chambers of the Heart. Consequently, other techniques have been developed to interrupt atrial fibrillation restore sinus rhythm. One such technique is strategic ablation of the atrial tissues and lesion formation through tissue ablation instruments.

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Page 8, delete paragraph [0025] and insert corrected paragraph [0025] as follows:

[0025] In another specific embodiment, the accessory includes a transmurality system which determines when a particular ablation is completed. The transmutality system may be adapted to measure the electricalcharacteristics of the local tissue to measure at least one of conductiontime, conduction distance, conduction velocity, phase angle, andimpedance through at least a portion of the targeted tissue. In another embodiment, the transmurality assessment system is based on a passiveinterface to the target tissue, minimizing the impact of certain misleadingsignals corresponding to one or tissue characteristics. Using thetransmurality assessment information, audio or visual feedback may beprovided to indicate the completion of an ablation lesion. In otherexamples, the feedback information may be applied for automatic closedloop control of a tissue ablation instrument.

[0025] In another specific embodiment, the accessory includes a transmurality system which determines when a particular ablation is completed. The transmutality system may be adapted to measure the electrical characteristics of the local tissue to measure at least one of conduction time, conduction distance, conduction velocity, phase angle, and

impedance through at least a portion of the targeted tissue. In another embodiment, the transmurality assessment system is based on a passive interface to the target tissue, minimizing the impact of certain misleading signals corresponding to one or more tissue characteristics. Using the transmurality assessment information, audio or visual feedback may be provided to indicate the completion of an ablation lesion. In other examples, the feedback information may be applied for automatic closed-loop control of a tissue ablation instrument.

Page 8, delete paragraph [0026] and insert corrected paragraph [0026] as follows:

[0026] The present invention may further include a jaw activation mechanism suitable for manual clamping by a surgeon. Alternatively, the jaw activation mechanism may include mounting elements upon the jaws which are designed to cooperate with surgical instruments allowing a surgeon to apply elamping force using standard surgical instruments such as graspers, forceps, for example. Last, another embodiment includes a jaw activation mechanism which may be remotely activated for use during less invasive procedures.

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Page 9, delete paragraph [0027] and insert corrected paragraph [0027] as follows:

[0027] In yet another aspect of the present invention, a method is provided for ablating biological tissue using an accessory adapted to include two jaws, a first jaw configured to accept an ablation device or instrument and the second jaw acting to compress the tissue therebetween. The method includes placing a portion of an ablation device into the first jaw, the portion including at least one ablation element adapted to ablate the tissue. The tissue is placed between the jaws and the jaws are brought together, reducing the overall thickness of the tissue to be ablated and removing and fluids which may exist from the ablation area. The method further-

includes determining the transmurality of the ablated tissue, the indication of transmurality being used to end the ablation process.

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